

# Form CPF M 102: Campaign Finance Report CLERK Municipal Form

Office of Campaign and Political Finance
TOWN OF EAST LONGMEADOW

2016 JUN 22 PM 12: 29

of Massachusetts	File with: City of Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 65-31-	Ending Date: 07-02-16 UNG EADOW
Type of Report: (Check one)	
☐ 8th day preceding preliminary ☐ 8th day preceding election    30	day after election year-end report _ dissolution
KATHLEEN G. HILL	COMMITTEE TO ELECT KATHLEEN HILL
Candidate Full Name (if applicable)	Committee Name
TOWN COUNCIL EAST LONGMEADOW	BRENDA S. HOULE
Office Sought and District :	Name of Committee Treasurer
222 Kibbé Ro	222 KIBBE RD., EAST LONGMEADOW
Residential Address	Committee Mailing Address
Telephone Number (optional): 413 - 525 - 25 64	phone Number (optional): 413 - 525 - 2564-
SUMMARY BALANCE IN	FORMATION:
Line 1: Ending Balance from previous report	918 00
Line 2: Total receipts this period (page 3, line 11)	983 24
Line 3: Subtotal (line 1 plus line 2)	1961. 74
Line 4: Total expenditures this period (page 5, line 14)	1826 74
Line 5: Ending Balance (line 3 minus line 4)	75 00
Line 6: Total in-kind contributions this period (page 6)	<del>0</del>
Line 7: Total (all) outstanding liabilities (page 7)	1115 47
Line 8: Name of bank(s) used: REMIER Sou	IPCE CREDIT UNION
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best of my lactivity, including all contributions, loans, receipts, expenditures, disbursements in kind contributionance activity of all persons acting under the authority or on behalf of this committee in accorda Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)	ations and liabilities for this reporting period and represents the campaign ance with the requirements of M.G.L. c, 55.  (Treasurer's signature)  Date:
Candidate with Committee and no activity independent of the committee  I certify that I have examined this report including attached schedules and it is, to the best of activity, of all persons acting under the authority or on behalf of this committee in accordanc incurred any liabilities nor made any expenditures on my behalf during this reporting period.	be with the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee OR Candidate with independent activity filing separate  I certify that I have examined this report including attached schedules and it is, to the best of finance activity, including contributions, loans, regeipts, expenditures, disbyrsement including campaign finance activity of all persons acting under the authority or on bynarios this comm	my knowledge and belief, a true and complete statement of all campaign d contributions and liabilities for this reporting period and represents the

## SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
06-07-16	JACKIE GREENIA 9 HILLCREST PARK S. HADLEY, MA. 01015	30∞	
04-25-16	KATHLEEN HILL 222 KIBBE RD E. LONGMEADON, MA 01028	41794	RETIRED ED VLATIONAL CONSULTANT NEW ENGLAND LEAGUE OF MIDDLE SCHOOLS
06-02-16	KATHLEËN HILL (LOAN)	1020	
06-07-16	KATHLEEN HILL (LOAN)	245 90	
06-13-16	KATHLEEN HILL	17970	
05-27-16	SUZANNE MURPHY 303 SOULE RD WILBRAHAM, NA. 01095	100 00	
			· .
Line 9: Total Recei	pts over \$50 (or listed above)	98374	
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD	98374	Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

#### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
04-25-16	Brity-A-SIEN. Cam	11525ASTONEHOLLOW DRIVE, #100 AUSTIN, TX 78758	LAWN SIGNS	41794
06-07-16	FAZIO'S RESTAUGANT	162 SHAKER RY E. LANGMEAYON	POST ELECTION DINNER FUR VOLUNTEERS	2459
06-21-16	KATHLEEN HILL	222 KIBBE RD E. LONGMEADOW	REIMBURSEMENT: POSTUARDS SUPPLIES COPYING POSTUARDS POST ELECTION DINNER	51743
06-62-16	REMINDER. PUBLICATIONS	280 N. MAIN ST E. LUNGMEADON	Political AD 6/2/16 ISSUE	28200
06-13-16	REMINDER Publications	280 N. MAINST E. LONGMEADOW	THANK YOU AD 6/16/16 issue	17970
06-01-16	u.s.P.S.	119 INDUSTRIAL DR. E. LONGMEADOW, MA	DIRECT DOOR MAILING & POSTAGE CHARGES	18377
		Line 12: Total Expenditures ov	er \$50 (or listed above)	18267±
		Line 13: Total Expenditures \$50	and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	1826 74

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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### SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Data Bassinal	From Whom Desciols	Dogidontial Address	Description of Contribution	¥7e!
Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		·		
		·		
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		-		
		Line 15: In-Kind Contributions	over \$50 (or listed above)	4
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	£
	1 5 /			

<sup>\*</sup> If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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# SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
04-25-16	KATHLEEN HILL	222 KIBBE RD E. LONGMEADON, MA	LAWN SIGNS	41794
05-27-16	KATHLEEN HILL	41 11	PREVIOUS LIABILITIES REPORTED ON 8 DAY PRE- ELECTION REPORTS	26133
06-07-16	KATHLEEN HILL	21 21.	POST ELECTION DINNER FOR COMPANY VOLUNTEER	× 245 90
06-02-16	KATHLEENHILL	A	ADDITIONAL POSTAGE FOR POST CARDS	10 20
06-13-16	KATHLEEN HILL	n d	THANK YOU AD REMINDER 6-18-16	17970
			9.5	
				`
	Enter on page 1, line 7	→ Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)	1115 07